

Our Ref: SF/FE/CAT

27 December 2017

Ms R Schiller  
Chief Executive Officer  
Birthrights

(via e-mail [info@birthrights.org.uk](mailto:info@birthrights.org.uk))

Dear Rebecca

Thank for your letter and I would like to clarify the situation regarding the Midwifery Led Units and update you on the Midwifery Led Services Review being carried out by Shropshire, Telford & Wrekin Clinical Commissioning Groups (CCGs).

No decision has been made on the Midwifery Led Units. The decision to carry out a review of the Midwifery Led Services was taken after our local Trust provider, NHS Shrewsbury and Telford Hospital Trust, raised concerns about staff levels stretched across multiple sites as they felt the service was not sustainable. The review demonstrated a mismatch between activity (babies being born, postnatal stays) and staffing. In Oswestry, Bridgnorth and Ludlow there were very low numbers of babies being born in these units (52, 78, 36 births in 2016/7 respectively) but they had an excess of midwifery time compared to activity (when assessed using a nationally accredited tool known as BirthRate Plus) whereas the Consultant Unit had insufficient staff for the activity there (3,978 births in 2016/7).

Staff and patient feedback showed this was affecting patient experience in the Consultant Unit and staff experience both in the Consultant Unit, where staff felt too busy to do what they wanted to do for their patients, and in the rural communities where staff were being pulled out of underused rural units at short notice to relieve pressure on the busier unit, leaving staff and service users alike uncertain as to when these units would be re-opened.

The low activity numbers do not relate to the last year where units were closed for several months by the Trust. Nor do they relate to any single year in isolation. There has been a steady decline in use over the last 7 years. This reflects the national picture where 87% of babies are now born in Consultant Units compared to 85% of Shropshire babies. It is clear from the review, therefore, that the current model cannot continue – it does not meet the needs of our population and creates uncertainty and anxiety.

The principles of the proposed model include the retention of the full range of birth settings for women in Shropshire, in line with the recommendations of 'Better Births'. This includes births continuing to be available in the following settings:

- Consultant Led Unit
- Alongside Midwife Led Unit (on the same site as the Consultant led unit)
- Freestanding Midwife Led Unit (not on the same site as the Consultant led unit)
- Home Birth available 24/7

This proposed new service model also includes the introduction of maternity hubs, in line with the requirements of 'Better Births'. The proposed five maternity hubs across the county would include antenatal and postnatal care which would be far more comprehensive than what is currently offered, meaning women will make fewer journeys through their pregnancy than they do under the current system. It would also have an equal offer at all hubs – something that is not the case currently. The hubs would include a broad range of services for up to 12 hours a day. This would include midwifery care, mental health and emotional wellbeing services, obstetric clinics, scanning and day assessment, including CTG monitoring, as well as other services including healthy lifestyle services, support from women's support assistants, and peer support.

Our proposed service model would increase the range and consistency of services available close to home for women across the County throughout their pregnancy and after their baby is born. You will note that paragraph 4.30 of Better Births states that '...in some community hubs there may be birthing facilities'. Indeed, in our service model we included a proposal for the maternity hubs in Shrewsbury and Telford to be on the same site as the MLUs, which will offer births 24/7.

For the review, an expert midwife was recruited from a different area to support the commissioner. The expert midwife also reviewed the on call arrangements. Following her findings, a new on call system has been put in place considering staff travelling times balanced against where they live and the rotation of midwives across the whole midwifery service. This new model meets the needs of the staff in terms of geographical distance to travel when on call so they can get to a woman within an hour.

The reduction in births in Midwifery Led Units is in line with the increase in need of pregnant women in Shropshire, Telford and Wrekin. The percentage of women giving birth in our Consultant Led Unit is in line with the findings of 'Better Births' where 87% of babies are now born in Consultant Units nationally, compared to 85% of Shropshire babies.

We asked the expert midwife to look at the pattern of babies being born before the midwife arrived. She looked at not just the detail of individual cases, but also the pattern – are there more since the rural MLUs were temporarily closed by the Trust? Are there more in areas which previously had an open MLU? The answer was no. There is no increase in these births against the normal rate for Shropshire (which is in line with the normal rate for the country at about 0.5%). It is an understandable concern for people to have, but the evidence shows there is no increase in these cases due to the closure of rural MLUs (which has resulted in a few women

travelling further than they otherwise may have done). The evidence also shows that our rates of births without an appropriate medical professional present are in line with the national average.

Our proposed new model would increase the proportion of women giving birth in midwifery led settings by:

- Over time, increasing the health of women during pregnancy
- Changing pathways in antenatal care so that all women receive care that plans for a midwife led birth, unless this won't be safe for the women or her baby or she chooses consultant led care for another reason
- Enabling women during pregnancy to get familiar with the midwife led units and staff who work there
- Enabling women to make a decision about their preferred place of birth later in pregnancy
- Moving the alongside MLU closer to the consultant led unit in order for a different level of risk to be safely managed

The proposed model is safe. The proposed model matches midwife presence to activity and demand so that every woman gets 1:1 care from a midwife during labour. Currently, not all women delivering in the Consultant Unit get that. The model has been developed using staffing levels that are in line with national guidance. Midwives will be available 24/7 across the county and there is an improved triage offer in the model that will assess women in labour to help to ensure they get to their chosen place of birth in time.

You raise a number of issues regarding comments you report to be from Mr Wright at the Trust and, as we cannot comment on his behalf, we would ask you to address them to him direct. The proposal is being taken to both Governing Bodies of the two CCGs and it is anticipated it will then go out for consultation.

Full details of the proposal for the new model of midwifery led care, and other supporting information including gathered data, are available on the Shropshire CCG website using the following link <http://www.shropshireccg.nhs.uk/get-involved/reviews-and-projects/midwife-led-units-review/midwife-led-units-reports/>

If you would like to discuss the proposal in further details or have any further questions please contact me.

Yours sincerely



**Dr Simon Freeman**  
**Accountable Officer**

cc Simon Wright, Chief Executive, SaTH